| No. <b>W 106328</b>   |            | Due no later than Aug 31, 2018   |                             | 2. Registere         | 2. Registered Agent and Address (NO PO BOX)  |         |             |  |
|---|------------|--|-----------------------------|----------------------|--|---------|-------------|--|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |            | Annual Report Form  1. Mailing Address: Correct in this box if needed.  GALA SHOWROOM LLC  MANUEL JUAREZ JUAREZ PO BOX 119 PAUL ID 83347 |                             | 617 PARK<br>TWIN FAL | MANUEL JUAREZ 617 PARKWOOD DR TWIN FALLS ID 83301  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar    |            | mos and Addresses of at  | least one Member or Manager |                      |  |         |             |  |
| Office Held   | Name       | illes and Addresses of at  | Street or PO Address        | City                 | State  | Country | Postal Code |  |
| MEMBER  | MANUEL JUA | AREZ   | 617 PARKWOOD DR             | TWIN FALL            | S ID   | USA     | 83301       |  |
| 5. Organized Under the Laws of:  ID  W 106238                                       |            | 6. Annual Report must be signed.* Signature: Manuel Juarez   |                             |                      | Date: 06/18/2018   |         |             |  |
| <b>W 106328</b> Processed 06/18/2018  |            | Name (type or print): Manuel Juarez  * Electronically provided signatures are accepted as original signatures.                           |                             |                      |  |         |             |  |